

Zionsville Athletic Booster Club Scholarship Application

1. Student Information

Name _____
Last First MI

Permanent address _____
Street City State Zip

Date of birth _____ Social Security # _____

Male ___ Female ___ Telephone # _____ Graduation date _____

2. Family Information

Name of parent/guardian _____

Permanent address _____
Street City State Zip

Telephone home _____ Telephone work _____

Name of employer _____ Position/Title _____

Employer address _____

Name & ages of children other than applicant (note if in college) _____

3. College/University Information

School you plan to attend _____

College address _____
Street City State Zip

Have you been accepted? _____ If no, please explain _____

Major field of study _____ This is a 2yr ___ 4yr ___ program

Date received _____	For office use only	All information included	Y	N
Reviewed by: _____				

4. Student Activities

A. Please list nonathletic extracurricular and community activities in which you have participated during your high school years. Please list in order of importance to you. Indicate any leadership position.

B. Please list all athletic activities in which you have participated in ZCHS. Specify years of participation, leadership roles, and specific achievements (e.g., statistical performance; team, conference, state, etc. recognitions). Include spring sports in which you intend to participate this year.

C. Work Experience

During high school years, did you work outside of the school hours and/or during vacations? _____ If yes, please list employment history.

Do you plan to work while in college? _____

D. Applicant Essay

Write (do not type) a brief paragraph explaining the value of your participation in athletics to your overall high school experience, and to your preparation for college (use this page only).

E. Parent/Guardian & Applicant Signatures

I hereby authorize the transfer of this applicant’s transcript to the Scholarship Committee, and the completion of this application by the guidance department. I further authorize the review of this application and transcript by the aforementioned Scholarship Committee of the Zionsville Athletic Booster Club, for the sole purpose of consideration for this scholarship award. Furthermore, I acknowledge that the information provided herein is true and correct.

Parent/legal guardian signature Date

Applicant’s signature Date

F. Academic Achievement

Please obtain a copy of your transcript from ZCHS Guidance Department and attach to this application.

G. Teacher's Recommendation

Applicant: Please fill in your name below and remove this sheet from the application. Give it to a teacher who knows you well enough to complete this recommendation.

Student name _____

Teacher _____

In what capacity do you know this student? _____

Please comment on this student's academic performance in your class and ways that this student has demonstrated leadership and character.

Teacher's signature _____ Date _____

Teacher: Upon completion of this form, please submit to the Guidance Department.

H. Coach's Recommendation

Applicant: Please fill in your name below and remove this sheet from the application. Give it to a coach who knows you well enough to complete the recommendation.

Student name _____

Coach _____

In what capacity do you know this athlete? _____

Please comment on this student's athletic performance for your sport and ways in which this student has demonstrated leadership and character in your sport.

Coach's signature _____ Date _____

Coach: Upon completion of this form, please submit to the Guidance Department.